

| AMEN | Docket No. SHO-0046 | | | | | | | | | |
|---|---------------------------------|--|-----------------------------------|---------------------------------------|------------------|--|--|--|--|--|
| Application 10/697,238-Cc | | Filing I October 3 | 1 | Examiner R. Hsu | Art Unit 3714 | | | | | |
| plicant(s): Kazı | uo OKADA et a | al. | | | | | | | | |
| vention: GAMIN | G MACHINE | | | | | | | | | |
| , | тс | THE COMMI | SSIONER FO | OR PATENTS | | | | | | |
| ransmitted here | | | | | | | | | | |
| he fee has been | calculated an | | S AS AMENI | | | | | | | |
| | | | | | | | | | | |
| | Remaining After Amendment | Number Previously Paid | Number Extra Claims Present | Rate | ,• | | | | | |
| Total Claims | 12 | - 20 = | | x | | | | | | |
| Independent Claims | 3 | - 3 = | | × | | | | | | |
| Multiple Depend | ent Claims (ch | eck if applicabl | e) | | | | | | | |
| Other fee (pleas | e specify): fe | extension for res or continued exa .114) | | nird month; Request E) (see 37 CFR | 1,810.00 | | | | | |
| TOTAL ADDIT | 1,810.00 | | | | | | | | | |
| No additional fee is required for this amendment. X Please charge Deposit Account No18-0013 in the amount of \$ 1,810.00 A duplicate copy of this sheet is enclosed. A check in the amount of \$ to cover the filing fee is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director is hereby authorized to charge and credit Deposit Account No 18-0013 as described below. A duplicate copy of this sheet is enclosed. X Credit any overpayment. | | | | | | | | | | |
| Carl Schaukow Attorney/Agent | | 211 | | | | | | | | |
| RADER, FISHN 1233 20th Stree Suite 501 Washington, DO (202) 955-3750 | et, N.W. C 20036 | R PLLC | | | | | | | | |

PTO/SB/17 (07-06) Approved for use through 01/31/2007, OMB 0651-0032 Trademark Office; U.S. DEPARTMENT OF COMMERCE

| 7 | Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control | | | | | | | | | | | | | |
|-----|--|--------------------------------------|------------------------------|--|------------------|--------------------------|-----------------|---------------|--|--|--|--|--|--|
| 7 | Effective on 12/08/ | Complete if Known | | | | | | | | | | | | |
| Ś | Fees pursuant to the Consolidated Approp | 7 (ppillodation) Training (| | 10/697,238-Conf. #9021 | | | | | | | | | | |
| × | FEE TRANS | | | October 31, 20 | | | | | | | | | | |
| | For FY 20 | First Named Inventor Kazuo OKAD | | | | | | | | | | | | |
| ŀ | | Examiner Name R. Hsu | | | | | | | | | | | | |
| L | Applicant claims small entity state | | Art Unit | | 3714 | | | | | | | | | |
| L | TOTAL AMOUNT OF PAYMENT | | Attorney Docket No. SHO-0046 | | | | | | | | | | | |
| | METHOD OF PAYMENT (check all that apply) | | | | | | | | | | | | | |
| | Check Credit Card Money Order None Other (please identify): | | | | | | | | | | | | | |
| ŀ | x Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC | | | | | | | | | | | | | |
| ŀ | For the above-identified depo | sit account, the Dire | ector is | hereby authorize | ed to: (che | ck all that apply) | | • | | | | | | |
| ļ | x Charge fee(s) indicated | l below | | Charge | e fee(s) in | dicated below, ex | ccept for th | he filing fee | | | | | | |
| 1 | Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | | | | | | | | |
| ŀ | FEE CALCULATION | . To allu 1.17 | | | | | | | | | | | | |
| ı | 1. BASIC FILING, SEARCH, AND E | XAMINATION FEES | 3 | | | | | | | | | | | |
| ١ | FI | LING FEES | SE | ARCH FEES | EXAMII | NATION FEES | | | | | | | | |
| 1 | Application Type Fee (\$ | Small Entity) Fee (\$) | Fee (\$ | Small Entity) Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees F | Paid (\$) | | | | | | |
| - (| Utility 300 | 150 | 500 | 250 | 200 | 100 | | | | | | | | |
| | Design 200 | 100 | 100 | 50 | 130 | 65 | ·——— | | | | | | | |
| | Plant 200 | 100 | 300 | 150 | 160 | 80 | | | | | | | | |
| | Reissue 300 | 150 | 500 | 250 | 600 | 300 | | | | | | | | |
| ł | Provisional 200 | 100 | 0 | 0 | 0 | 0 | | | | | | | | |
| | 2. EXCESS CLAIM FEES | | | | | | | Small Entity | | | | | | |
| ١ | Fee Description | | | | | Fee (\$) | <u>Fee (\$)</u> | | | | | | | |
| - 1 | Each claim over 20 (including Reissues) | | | • | | 50 | 25 | | | | | | | |
| ١ | Each independent claim over 3 (including Reissues) | | | • | | | 200 | 100 | | | | | | |
| ١ | Multiple dependent claims | | | | | | 360 | 180 | | | | | | |
| ١ | Total Claims Extra Claims | Fee | Pald (\$) | _ | lultiple Depende | | | | | | | | | |
| I | 12 -20 = x = <u>Fee (\$)</u> Fee Paid (\$) | | | | | | | | | | | | | |
| | HP = highest number of total claims paid fo | . / | Paid (\$) | | | | - | | | | | | | |
| | Indep. Claims 3 -3= | Fee (\$) | 100 | Fee Paid (\$) | | | | | | | | | | |
| | HP = highest number of independent claims | | 3. | | | | | | | | | | | |
| | 3. APPLICATION SIZE FEE | | | | | | | | | | | | | |
| Į | If the specification and drawings e | xceed 100 sheets of | `paper | (excluding electr | onically f | iled sequence or | computer | | | | | | | |
| - 1 | listings under 37 CFR 1.52(e)), | | | | for small e | entity) for each a | dditional 5 | 0 | | | | | | |
| - 1 | sheets or fraction thereof. See | | | 37 CFR 1.16(s). additional 50 or frac | | of Fee (\$) | F | D-14 (A) | | | | | | |
| ١ | Total Sheets Extra Shee | <u> </u> | Pald (\$) | | | | | | | | | | | |
| | - 100 = 4. OTHER FEE(S) | Fees | Pald (\$) | | | | | | | | | | | |
| ١ | Non-English Specification, \$130-fee (no small entity discount) | | | | | | | | | | | | | |
| ı | Other (e.g., late filing surcharge) 1253 Extension for response within third month 1,020. | | | | | | | | | | | | | |
| | 1801 Request for continued examination (RCE) (see 37 790. | | | | | | | | | | | | | |
| i | SUBMITTED BY | | | | | | | | | | | | | |
| | Signature AII | Registration No. (Attorney/Agent) | 29,211 | Telephone | (202) 95 | 55-3750 | | | | | | | | |
| | Name (Print/Type) Carl Schaukowito | (monno), Ageir) | • | Date | April 19 | 9, 2007 | | | | | | | | |